

LAW OFFICES

BLOOSTON, MORDKOFKY, DICKENS, DUFFY & PRENDERGAST, LLP

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JOHN A. PRENDERGAST
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MARY J. SISAK
D. CARY MITCHELL
SALVATORE TAILLEFER

July 1, 2014

ARTHUR BLOOSTON
1914 - 1999

AFFILIATED SOUTH AMERICAN OFFICES

ESTUDIO JAUREGUI & ASSOCIATES
BUENOS AIRES, ARGENTINAROBERT M. JACKSON
OF COUNSELPERRY W. WOOFER
LEGISLATIVE CONSULTANTEUGENE MALISZEWSKYJ
ENGINEERING CONSULTANT

WRITER'S CONTACT INFORMATION

sta@bloostonlaw.com
202-828-5562REDACTED - FOR PUBLIC INSPECTION

VIA HAND DELIVERY

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, DC 20554ACCEPTED/FILED
JUL 1 2014
Federal Communications Commission
Office of the SecretaryRE: Form 481 - Carrier Annual Reporting Data Collection, 2014
WC Dockets No. 14-58, 10-90 and 11-42

Dear Ms. Dortch:

Pursuant to sections 54.313(i) and 54.422(c) of the Commission's Rules,¹ Northeast Florida Telephone Company (the "Company") hereby submits a copy of its "FCC Form 481 - Carrier Annual Reporting Data Collection Form," as filed with the Universal Service Administrative Company. A copy is also being submitted to the appropriate state regulatory commission and tribal government, as further required by sections 54.313(i) and 54.422(c).

Pursuant to the Protective Order adopted by the Commission in this proceeding,² the Company requests confidential treatment for the financial information included in its report, as required by §54.313(f)(2), on the grounds that it is commercially sensitive information that is not normally released to the public. The Company also requests confidential treatment for its Five

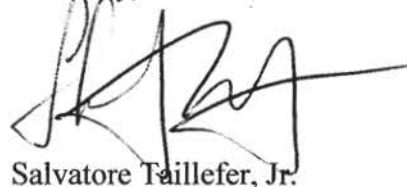
¹ 47 CFR §§54.313 and 54.422.² In the Matter of Connect America Fund, et al., PROTECTIVE ORDER, WC Docket No. 10-90, et al., DA 12-1857, released November 16, 2013.

Year Service Quality Plan pursuant to sections 0.457 and 0.459 of the Commission's Rules. A letter in support of the Company's request is attached hereto.

In accordance with the Protective Order and the Commission's rules, two redacted copies and one non-redacted copy have been submitted on paper via hand delivery to the Secretary's Office, two non-redacted copies have been submitted for hand delivery to Mr. Charles Tyler of the Telecommunications Access Policy Division, and a redacted copy has also been filed via the Electronic Comment Filing System.

If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,

A handwritten signature in black ink, appearing to read 'Salvatore Taillefer, Jr.', with a stylized, cursive script.

Salvatore Taillefer, Jr.

Counsel to Northeast Florida Telephone
Company

CC:

Mr. Charles Tyler, Telecommunications Access Policy Division, Wireline Competition Bureau

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Washington, DC 20554

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JUL 1 2014
Federal Communications Commission
Office of the Secretary

RE: Form 481 - Carrier Annual Reporting Data Collection, 2014
WC Dockets No. 14-58, 10-90, and 11-42

Dear Ms. Dortch:

Pursuant to §0.457 and §0.459 of the Commission's rules, Northeast Florida Telephone Company ("the Company"), by its attorneys, hereby requests that certain materials and information be withheld from public inspection. Specifically, the Company requests confidential treatment of the Five Year Service Quality Improvement Plan (the "Plan" or "confidential information") attached to its Form 481 filing.

In support of its request for confidential treatment and pursuant to the requirements under § 0.459(b) of the Commission's rules, the Company states the following:

1. Identification of the specific information for which confidential treatment is sought.

The Company seeks confidential treatment of the Five Year Service Quality Improvement Plan, attachment 210335FL112 to the Form 481 filing accompanying this letter, which contains sensitive financial information about the Company as well as information about the Company's projected network improvements and upgrades for voice and broadband services during the period from 2015 through 2019.

2. *Identification of the Commission proceeding in which the information was submitted or description of the circumstances giving rise to the submission.*

The documents are being submitted as part of the annual Eligible Telecommunications Carrier Report (Form 481) mandated by section 54.313 of the Commission's rules.

3. *Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged.*

The data described is highly confidential and sensitive commercial and financial information which constitutes trade secrets or sensitive commercial and financial information that "would customarily be guarded from competitors,"¹ and is therefore exempted from mandatory disclosure under FOIA Exemption 4 and Section 0.457(d) of the Commission's rules.²

4. *Explanation of the degree to which the information concerns a service that is subject to competition.*

The Plan relates to voice and broadband services provided by the Company that are subject to competition from competitive local exchange carriers, cable television system operators, electric power utilities, fixed and mobile wireless service providers, and/or satellite carriers.

5. *Explanation of how disclosure of the information could result in substantial competitive harm.*

Disclosure of the confidential information is likely to result in substantial competitive harm to the Company because the confidential information could provide competitors with commercially sensitive insights related to the Company's operations, service offerings, and costs.

6. *Identification of any measures taken by the submitting party to prevent unauthorized disclosure.*

The Company does not make the Five Year Service Quality Improvement Plan or any of the information contained therein publically available in any way, and further limits internal access to key employees subject to strict non-disclosure obligations.

7. *Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties.*

The Company does not make the confidential information available to the public and it has not previously allowed disclosure of the confidential information to third parties that are not otherwise bound by confidentiality obligations.

¹ *Id.* § 0.457(d)(2).

² 5 U.S.C. § 552(b)(4); 47 C.F.R. § 0.457(d).

8. *Justification of the period during which the submitting party asserts that the material should not be available for public disclosure.*

The confidential information should be treated as confidential for an indefinite period, as the Company will always be subject to competition and the competitive harms associated with the disclosure of the confidential information.

In order to provide adequate protection from public disclosure, the Commission should strictly limit distribution of the confidential information within the Commission on a "need to know" basis and not allow any distribution outside of the Commission. In the event that any person or entity outside the Commission requests disclosure of the confidential information, the Company requests that it be so notified immediately so that it can oppose such request or take other action to safeguard its interests as it deems necessary.

Please direct any questions regarding this submission to the undersigned.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Salvatore Tailfefer, Jr.', written over the printed name.

Salvatore Tailfefer, Jr.

Counsel for

Northeast Florida Telephone Company

REDACTED - FOR PUBLIC INSPECTION FCC Form 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0086/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code 210335
 <015> Study Area Name NORTHEAST FLORIDA
 <020> Program Year 2015
 <030> Contact Name: Person USAC should contact with questions about this data Deborah Nobles
 <035> Contact Telephone Number: 9046880029 ext. Number of the person identified in data line <030>
 <039> Contact Email Address: Email of the person identified in data line <030> dnobles@townes.net

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JUL 1 2014

Federal Communications Commission
Office of the Secretary

ANNUAL REPORTING FOR ALL CARRIERS		S4.313 Completion Required	S4.422 Completion Required
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<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	(attach descriptive document)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	(attach descriptive document)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 210335f1510.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 210335f1610.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010> 210335f11010.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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(100) Service Quality Improvement Reporting
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

210335f1112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	<input type="checkbox"/>
<114>	Report how much universal service (USF) support was received	<input type="checkbox"/>
<115>	How (USF) was used to improve service quality	<input type="checkbox"/>
<116>	How (USF) was used to improve service coverage	<input type="checkbox"/>
<117>	How (USF) was used to improve service capacity	<input type="checkbox"/>
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

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(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

[illegible]

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OMB Control No. 3060-0986/OMB Control No. 3050-0819
July 2013

<701> Residential Local Service Charge Effective Date
<702> Single State-wide Residential Local Service Charge

1/1/2014

[illegible]

See attached worksheet

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<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

[illegible]

<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net
<810>	Reporting Carrier	Northeast Florida Telephone Company
<811>	Holding Company	Townes Tele-Communications, Inc.
<812>	Operating Company	N/A

<B13>	<a1>	<a2>	<a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation

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(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code 210335
 <015> Study Area Name NORTHEAST FLORIDA
 <020> Program Year 2015
 <030> Contact Name - Person USAC should contact regarding this data Deborah Nobles
 <035> Contact Telephone Number - Number of person identified in data line <030> 9046880029 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> dnobles@townes.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
 <922> Feasibility and sustainability planning;
 <923> Marketing services in a culturally sensitive manner;
 <924> Compliance with Rights of way processes
 <925> Compliance with Land Use permitting requirements
 <926> Compliance with Facilities Siting rules
 <927> Compliance with Environmental Review processes
 <928> Compliance with Cultural Preservation review processes
 <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)

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REDACTED - FOR PUBLIC INSPECTION

(1100) No Terrestrial Backhaul Reporting
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

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(1200) Terms and Condition for Lifeline Customers

Lifeline
Data Collection Form

FCC Form 481

OMB Control No. 3060-0985/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

210335f11210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

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REDACTED - FOR PUBLIC INSPECTION

(3000) Rate Of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481

OMB Control No. 3050-0936/OMB Control No. 3050-0819

July 2013

<010> Study Area Code 210335
 <015> Study Area Name NORTHEAST FLORIDA
 <020> Program Year 2015
 <030> Contact Name - Person USAC should contact regarding this data Deborah Nobles
 <035> Contact Telephone Number - Number of person identified in data line <030> 9046880029 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> dnobles@townes.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

- (3010) Progress Report on 5 Year Plan
 Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

- (3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313(f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

- (3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

- (3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))
 (3014) If yes, does your company file the RUS annual report

(Yes/No) ☒ ☒
 (Yes/No) ☒ ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

- (3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☐
 (3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

- (3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

- (3018) If the response is no on line 3014, Is your company audited?

(Yes/No) ☒ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

- (3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications ☒

- (3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☒

- (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. ☒

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, ☐

- (3023) Underlying information subjected to a review by an independent certified public accountant ☐

- (3024) Underlying information subjected to an officer certification. ☐

- (3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

210335f13026.pdf

- (3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

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Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	210335
<015> Study Area Name	NORTHEAST FLORIDA
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035> Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: NORTHEAST FLORIDA	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2014
Printed name of Authorized Officer: Deborah Nobles	
Title or position of Authorized Officer: Vice President of Regulatory Affairs	
Telephone number of Authorized Officer: 9046880029 ext.	
Study Area Code of Reporting Carrier: 210335	Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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Attachments

REDACTED - FOR PUBLIC INSPECTION

Response to Line 112
Northeast Florida Telephone Company
Study Area 210335

Initial Five-year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)

Northeast Florida Telephone Company ("NEFCOM") submits its initial five-year build-out Service Quality Improvement Plan pursuant to C.F.R. §54.202(a)(1)(ii) that specifies the proposed improvements or upgrades to NEFCOM's network throughout its service area. In addition, NEFCOM is providing information that includes an estimate of the population that will be served as a result of these improvements.

The receipt of USF support, combined with other funding sources will allow NEFCOM to continue to meet its broadband obligations within its service area, complete service requests within a reasonable amount of time, and provide reliable, state-of-the-art, high-quality voice and broadband service, to its 6,138 rural customers in 3 wire center. The projects listed within this plan will be used to improve or upgrade the network over the next five years.

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Data Request for FCC Annual Reporting Requirement
§ 54.313 (a) (1) - Five-Year Service Quality Improvement Plan
July 1, 2014

Northeast Florida Telephone Company

SAC: 210335

Wire Center CLI: MCLNFLXADS1
MCLNFLXA00W
SNSNFLXADS1

Capital Expenditures - VOICE

FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
---------	---------	---------	---------	---------	---------

[REDACTED]

[illegible]

[illegible]

CONFIDENTIAL FINANCIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS 01-92, 96-45, GN DOCKET NO 09-51, WT DOCKET NO 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION.

REDACTED - FOR PUBLIC INSPECTION

REDACTED - FOR PUBLIC INSPECTION

Data Request for FCC Annual Reporting Requirement

§ 54.313 (a) (1) - Five-Year Service Quality Improvement Plan

July 1, 2014

Northeast Florida Telephone Company

SAC: 210335

Wire Center CLLI: MCLNFLXADS1

MCLNFLXA00W

SNSNFLXADS1

Capital Expenditures - BROADBAND

FY 2014

FY 2015

FY 2016

FY 2017

FY 2018

FY 2019

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]

[illegible]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

CONFIDENTIAL FINANCIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS 01-92, 96-45, GN DOCKET NO 09-51, WT DOCKET NO 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION.

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SAC: 210335
Wire Center: MCLNFXADS1
MCLNFXA00W
SN5NFXADS1

[illegible]

CONFIDENTIAL FINANCIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS 01-92, 96-45, GN DOCKET NO 09-51, WT DOCKET NO 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION.

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CONFIDENTIAL FINANCIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS 01-92, 96-45, GN DOCKET NO 09-51, WT DOCKET NO 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION.

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Carrier Name: Northeast Florida Telephone Company
Carrier SPIN: 143001439
Carrier SAC: 210335
Operating State: Florida

Line 510: Service Quality Standards and Consumer Protection Rules Compliance

Northeast Florida Telephone Company ("NEFCOM" or "the Company") established a Quality of Service Policy ("Policy") that incorporates the service objectives previously included in the Florida Public Utility Commission's rules. The Policy guarantees NEFCOM will meet all service standards or provide a \$25.00 service standard credit to any customer if it is determined that NEFCOM failed to meet the service standard goals.

NEFCOM complies with the following federal consumer protection rules and regulations:

FCC 47 C.F.R. §§64.2001-64.2011 – Customer Proprietary Network Information ("CPNI")
FTC 16 C.F.R. §681.2 – Identity Theft Red Flags and Address Discrepancies Under the Fair and Accurate Credit Transactions Act of 2003

All customer protection and disclosures established by the Fair Credit Reporting Act (15 U.S.C. §§1681, *et seq.*) and the Truth in Lending Act (15 U.S.C. §§1601, *et seq.*)

The Company has a CPNI Policy Manual detailing and enforcing the requirements of the federal CPNI rules. Each year, the CPNI Compliance Officer (1) communicates with the Company's attorneys and/or consultants regarding CPNI responsibilities, requirements and restrictions; (2) supervises the training of Company employees and agents who use or have access to CPNI; (3) supervises the use, disclosure, distribution or access to the Company's CPNI by independent contractors and joint venture partners; (4) maintains records regarding the use of CPNI in marketing campaigns; and (5) receives, reviews and resolves questions or issues regarding use, disclosure, distribution or provision of access to CPNI. The CPNI Compliance Officer certifies compliance annually with the FCC by March 1.

The Company has an Identity Theft Prevention Program ("the Program") that was approved by the Board of Directors in September 2008. The Board appointed Red Flag Coordinator is responsible for updating the Program as necessary; the day-to-day supervision of the Program; training Company employees regarding their responsibilities with respect to the Program; and responding to employee questions and concerns regarding identity theft or the Program. The Red Flag Coordinator is required to annually prepare an Identity Theft Prevention Program Compliance Report for the Board's approval by October 1. The Identity Theft Prevention Program Compliance Report evaluates the effectiveness of the Program; the nature and extent of the Company's service provider arrangements and their impact on the effectiveness of the Program; reports any significant incidents involving identity theft and the Company's response to such incidents; and provides recommendations to the Board for periodic reviews of the Program and the adoption of material changes and other revisions, modifications and updates to the Program.

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Carrier Name: Northeast Florida Telephone Company
Carrier SPIN: 143001439
Carrier SAC: 210335
Operating State: Florida

Line 610: Functionality in Emergency Situations

Northeast Florida Telephone Company ("NEFCOM" or "the Company") has an Emergency Operations Plan ("EOP" or "the Plan") that addresses the requirements for continuity of service and systematic restoration of service after loss of service due to an emergency. The EOP is administered and maintained by a member of senior management of the parent company, Townes Telecommunications, Inc., and is reviewed annually to ensure that each applicable section is accurate and any changes or updates to the Plan are made on a timely basis.

An Emergency Director has been authorized to implement the provisions of the EOP. The Emergency Director conducts training with employees and is responsible for ensuring that all new employees are provided a 30 minute overview of the Plan as part of their orientation. Specific supervisory personnel receive additional intense instructions regarding special areas of the Plan

The Plan established an Emergency Committee made up of senior management and key company personnel, who upon notification by the Emergency Director that a potential emergency exists, convene to declare an emergency, notify affected parties and assume control of restoration of service efforts.

An emergency control center is established at the Company's business office, which is equipped with a back-up power generator and a wireless telephone set. Depending upon the severity and type of emergency and the safety of the emergency location, a control center may be established at the site of the event.

In case of power outages, batteries in the central office will last on average from 4-8 hours depending on how many lines (AMP load) are served at that particular location. The stand-by generator has 24 hour diesel capacity and small generators are available to be put on smaller concentrators if power is lost. The small generators have to be refueled every few hours.

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[illegible]

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<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

[illegible]

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<010>	Study Area Code	210335
<015>	Study Area Name	NORTHEAST FLORIDA
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Deborah Nobles
<035>	Contact Telephone Number - Number of person identified in data line <030>	9046880029 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	dnobles@townes.net

<810>	Reporting Carrier	Northeast Florida Telephone Company
<811>	Holding Company	Townes Tele-Communications, Inc.
<812>	Operating Company	N/A

[illegible]

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Response to Line 1010
Northeast Florida Telephone Company
Study Area No. 210335

Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Northeast Florida Telephone Company ("NEFCOM") is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of \$46.96 as specified in Public Notice DA 14-384 issued on March 20, 2014. NEFCOM's current total local end-user rate¹ of \$14.00 (Florida has no mandated state fees) is not above the standard deviation as specified in the USF/ICC Transformation Order.²

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

² USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."

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Carrier Name: Northeast Florida Telephone Company
 Carrier SPIN: 143001439
 Carrier SAC: 210335
 Operating State: Florida

Line 1210: Terms and Conditions for Lifeline Program Customers

Northeast Florida Telephone Company ("NEFCOM" or "the Company") complies with the FCC CFR 47 §§54.4, Universal Service Support for Low-Income Customers and the Florida Public Service Commission's rule 25-4.0665 relating to Lifeline Service. The Company has developed a Lifeline Program Policy & Procedures Manual, which incorporates both the federal and state Low-Income Program requirements. Lifeline is a non-transferable retail service offering for which qualifying low-income consumers receive a \$9.25 federal discount and a \$3.50 company discount on flat rated basic local telephone service, whether it is purchased on a stand-alone basis or as part of a bundled service that includes voice and data services and optional calling features. Lifeline customers are charged a separate charge for toll calls, but are provided Toll Blocking free of charge if they elect to subscribe to the service. The Lifeline supported services are as shown below:

	NEFCOM	
Residence Access Line	14.00	
Federal SLC	6.50	
Total Monthly Rate	20.50	
<u>Lifeline Discounts to Total Monthly Rate:</u>		
Federal Flat Rate Lifeline Support	(9.25)	<i>FCC 497: Lifeline Worksheet</i>
Company Lifeline Support	(3.50)	
Total Lifeline Service Monthly Rate	(12.75)	
Net Monthly Local Service for Lifeline Customer	7.75	

Additional Services:

Toll Blocking is free to Lifeline customers who subscribe to this service.

The company is required to include the Lifeline Service Program in their Local Exchange Tariff. The rates for basic local residential service are also contained in the Local Exchange Tariff and the rates for the federal SLC are included in the NECA Tariff No. 5. Changes to any of these rates must be approved by the appropriate regulatory agency.

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3005b IncomeStatement		
Current Value For Total Fixed Charges (26)		Error Status
Prior Year	1 Value is valid.	
This Year	1 Value is valid.	

	Number of fields with invalid data	
3005a BalanceSheet	0	
3005b IncomeStatement	0	
3005c Cashflow	0	

Mandatory fields that are blank			
Worksheet	Input Item	Line Item	Error Status
3005a BalanceSheet	Study Area Code	<010>	OK
3005a BalanceSheet	Study Area Name	<015>	OK
3005a BalanceSheet	Program Year	<020>	OK
3005a BalanceSheet	Contact Name - Person USAC should contact regarding this data	<030>	OK
3005a BalanceSheet	Contact Telephone Number - Number of person identified in data line <030>	<035>	OK
3005a BalanceSheet	Contact Telephone Email Address - Email Address of person identified in data line <030>	<039>	OK
3005c Cashflow	Explanation for cell C20	5	OK
3005c Cashflow	Explanation for cell C39	22	OK
3005c Cashflow	Explanation for cell C45	27	OK

Totals that can not be zero			
Worksheet	Input Item	Line Item	Error Status
3005a BalanceSheet	Total Assets	74	OK
3005a BalanceSheet	Total Liabilities and Equity	59	OK
3005b IncomeStatement	Input items for prior year		OK
3005b IncomeStatement	Input items for current year		OK

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(3005b) Operating Report for Privately-Held Rate of Return Carriers
Balance Sheet - Data Collection Form
Page 2 of 3

FCC Form 481
OMB Control No. 3060-0986
July 2013

<010> Study Area Code
<015> Study Area Name
<020> Program Year
<030> Contact Name - Person USAC should contact regarding this data
<035> Contact Telephone Number - Number of person identified in data line <030>
<039> Contact Telephone Email Address - Email Address of person identified in data line <030>

<010> 210335
<015> Northeast Florida Telephone Company
<020> 2015
<030> Deborah Nobles
<035> 904-688-0029
<039> dnobles@townes.net

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(3005c) Operating Report for Privately-Held Rate of Return Carriers
Balance Sheet - Data Collection Form
Page 3 of 3

FCC Form 481
OMB Control No. 3060-0986
July 2013

<010> Study Area Code
<015> Study Area Name
<020> Program Year
<030> Contact Name - Person USAC should contact regarding this data
<035> Contact Telephone Number - Number of person identified in data line <030>
<039> Contact Telephone Email Address - Email Address of person identified in data line <030>

<010> 210335
<015> Northeast Florida Telephone Company
<020> 2015
<030> Deborah Nobles
<035> 904-688-0029
<039> dnobles@townes.net

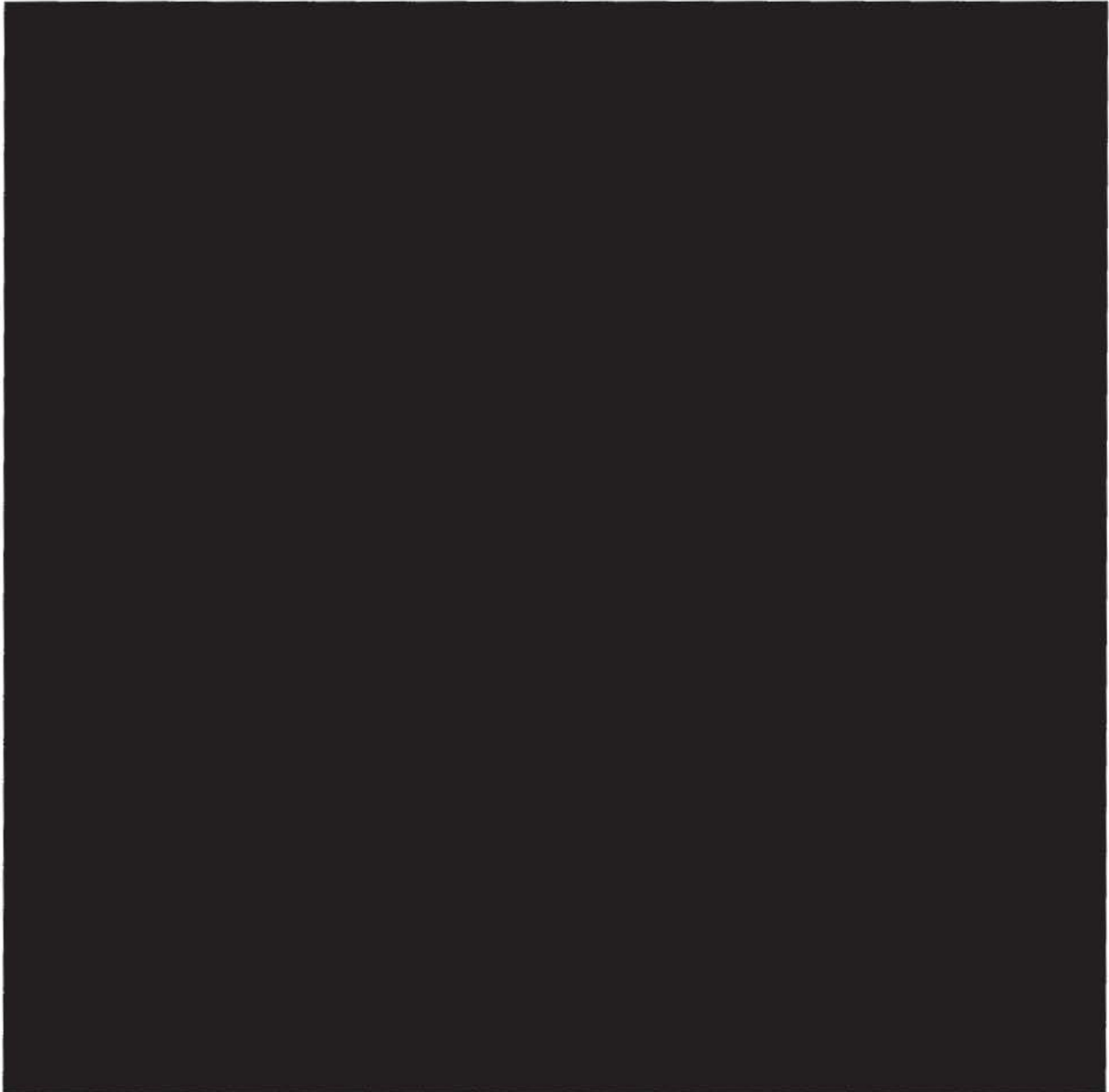
PART C. STATEMENTS OF CASH FLOWS

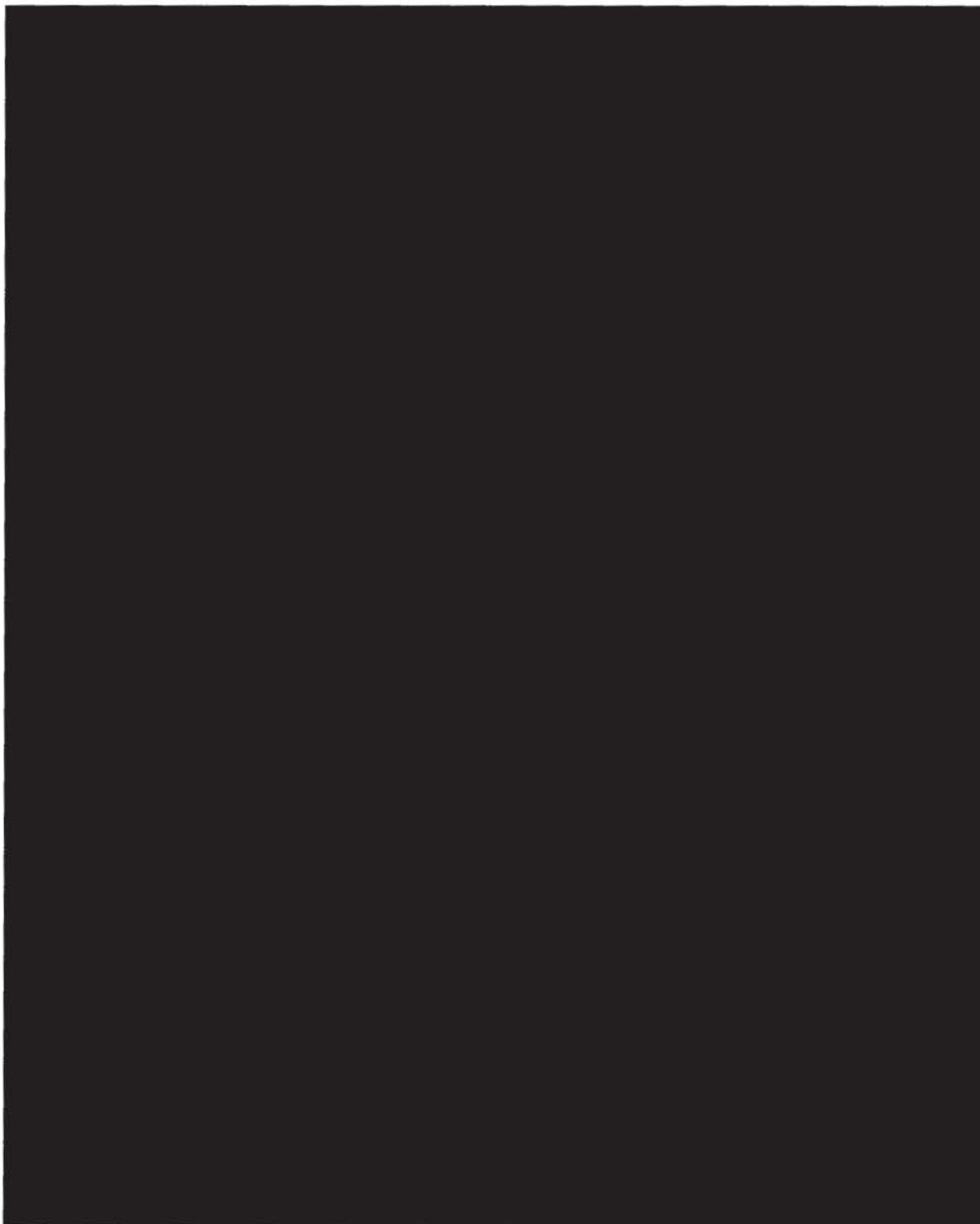
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Northeast Florida Telephone Company, Inc.
505 Plaza Circle Suite 200
Orange Park, Florida 32073

904-688-0017
(Fax) 904-688-0049

George Frederick CPA PLLC
7807 E Oberlin Way
Scottsdale, AZ 85266





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